	Žieni	PRIVICAÇII ZSI Ellec	NYFEEO IVE Octob	TÉRM er 1, 20	IIVATI XXX	ON RE	CORI	488	des.	1	71	2. 2.
		PART (	RT I (Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY				
TC	OTAL CLAIMS		400	~ \$ 72 - ac \$			RATE	FEE	1	RATE	FEE	
FO	)R		NUMBER	NUMBER EXTRA		7	BASIC FEE		OR	Basic Fee	800	
TOTAL CHARGEABLE CLAIMS			./ minus 20=				7	XS 9=		OR	XS18=	
INC	EPENDENT CL	/ minus 3 =		•			X40=			X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				7			OR		
• 11	the difference	in cohemn 1 is	loca than zero patas "O" in ant			2	_	+135=		OR	+270=	
**	1 1 .		ess than zero, enter "0" in column 2					TOTAL		OR	TOTAL	8100
0	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL I	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		MUMU PREVIC PAID	BER	PRESEA EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 19	Minus	<i>Q</i>	0	· 6		X\$ 9=	-	OR	X\$18=	
A RE	Independent	· 2	Minus	•••	3	-0		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT								+135=		OR	+270=	
7	7/8/05 (Column 1) (Column 2) (Column 3)							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	6
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER	PRESEN EXTR		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 15	Minus	-2	0_	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 2	Minus	٠ ٠	3_	·		X40=		OR	X80=	
L	HRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENT	CLAIM			+135=		OR	+270=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
•	(Column 1) (Column 2) (Column 3)									•	ADD11.1 CL	•
ENT C	milian e e e e e e e e e e e e e e e e e e e	CLAIMS REMAINING AFTER AMENDMENT	- PARIC	HIGH NUM PREVI	IEST BEA	PRESE EXTR	NT	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
\$	Total	•	Minus					X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	•	Minus	•••		•		X40=		1	You	1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del> </del>	OR		<del> </del>
٠.	. If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	<u></u>
**	ff the "Highest Nu	mn 1 is less men t mber Previously Pi mber Previously P	ald For IN THI	S SPACE	is feet th	an 20. ente	· 20.	TOTAL ADDIT. FEE		OR	ADDIT, FEE	
•	The Highest Nun	nber Previously Pa	id For (Total o	rindepend	lent) is th	e highest n	umber i	ound in the ap	propriate bo	ax in o	olumn 1.	

FORM PTO-475

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